

Representative Eileen Cody

34th Legislative District



April 2004



Rep. Eileen Cody

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Dear neighbor,

I'm glad I get this chance to keep you posted as to the happenings during our 60-day session. Some people thought we wouldn't make it on time, but we actually managed to finish right on schedule.

Upon arriving in Olympia in January there was a long list of issues awaiting us, but we were prepared and worked hard to keep our commitments with the people of Washington:

- to invest in education:
- to make health care more affordable; and
- to create good-paying jobs with benefits

In the next few days you'll be receiving Rep. Joe McDermott's newsletter, in which he includes the pieces of Legislation we passed to favor children, particularly in the realm of education.

My work both as chair of the Health Care Committee and as a nurse, keep me focused on real-life issues: things that hit home, that affect all of us and that we need to find solutions for.

Inside this newsletter I'm including information on a few of the many pieces of legislation we addressed this short session. Please take a moment to read it.

You'll find that in these sixty days we had our hits and misses down at the state capital, and while many issues did reflect sound public policy, there were others that didn't get the attention they deserved. I am discouraged, for example, at the lack of progress to address the patient-safety and medical-malpractice issue.

I thank you for your interest and your involvement in State Government and always welcome your comments, questions or ideas, so feel free to contact me anytime.

Sincerely,

Eileen Cody

Eileen Cody State Representative



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The Supplemental Budget

The supplemental budget makes small adjustments

to appropriations in response to caseload changes. This year the economy is beginning to improve and the state's revenue picture has gotten stronger. The state's reserves were also healthier because the federal government provided fiscal relief to the states. All of these areas came into play this session, which allowed the Legislature to mitigate some of the cuts and re-

ductions that were part of the original budget last year.

In crafting the budget, this session we focused on people. This supplemental budget was carefully crafted and focuses on returning funding to areas where we felt the previous year's cuts were too deep. For example:

- No health-care premiums for Medicaid children in families whose income is less than 150 percent of the poverty level.
- Hospitals get funding to help more uninsured and medically indigent citizens.
- Community clinics also get an extra boost to help people who need it.

- Mental health services are funded to replace cuts.
- More money goes to school districts that don't have significant local property-tax revenue to help them fund their basic programs.
- Stronger financial support is directed to boost enrollment in our universities.
- Domestic violence shelters receive state funding to grow.
- A Homeless Families Fund is created.
- The state's child welfare system is improved.
- The school-meals program for eligible children is expanded.

Skilled Workers = Good Jobs

Vocational and apprenticeship training are a cost-effective means to landing well-paid, high-demand jobs

that also come with good benefits. This type of training also helps businesses fill jobs that require specialized skills.



This session I supported legislation that grants

6.7 acres of land to expand the Duwamish Training Center. This branch of the South Seattle Community College has helped workers build solid careers for many years. Students who complete programs offered by the center earn an annual average salary of \$50,599.

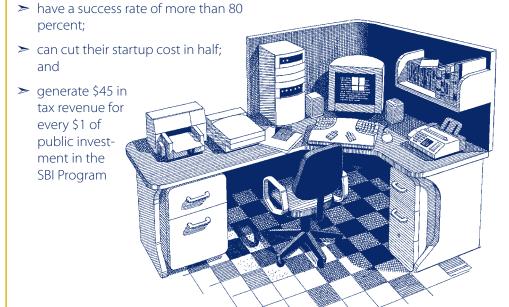
With this expansion, the Duwamish Training Center can grow into a world-class regional training hub of transportation, aerospace, construction and manufacturing instruction.

There's no business like small business

Small businesses are the backbone of our state's economy because they employ approximately 60 percent of our workforce. But like everything else, small businesses are hard to startup and keep afloat.

This session, we passed a bill that creates a Small Business Incubator Program for our state. Small-business incubators are proven tools in promoting economic development. Business-incubators provide hands-on management help, access to financing, and technical support.

They work with small businesses to obtain office space, equipment, and flexible leases. The program involves companies in manufacturing and technology, among other industries. Companies that receive this kind of assistance:



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Home Health Care Workers got a much deserved boost

Home care workers earn just \$8.43 an hour for working strenuous, laborintensive jobs. They help to keep seniors and the developmentally disabled in their own homes allowing them to be more independent, closer to their families, and saving the state money.

This session we finally worked out a new contract for our state's 26,000 home caregivers that gives them a pay boost of 50 cents an hour, plus health benefits and workers compensation.

Better Nutrition in Schools

This session we passed legislation directing the Office of the Superintendent of Public Instruction to develop a model policy for nutritional foods and exercise programs in public schools.

Recent studies show that one in six American children is considered obese, and obesity can lead to diabetes, heart disease, cancer and high blood pressure. These kids will have to battle health issues before they even know what hit them. It's time to focus on healthy nutritional options at school, combined with adequate physical activity.

The measure we passed will not solve the problem overnight, but it's a step in the right direction, and schools need to be part of the solution. Our kids need to break the junk-food-junkie-couch-potato pattern and start learning the benefits of balanced meals and exercise.

Patient Safety, Medical Malpractice and Health Care Coverage: next year's priorities

We face a crisis in our state's medical system. The high cost of health care, partly due to medical malpractice insurance premiums, is an issue that we cannot afford to ignore any longer. This session House Democrats put forward many possible solutions aimed at strengthening patient safety — and making malpractice insurance more available and affordable for doctors.

We passed the following 11 bills from the House (many with broad bipartisan support) and they all died in the Senate:

- HB 2834: to establish a task force on discipline for health-care professionals
- **HB 2879:** to streamline the sanctions process for health-care professions
- HB 2816: to extend the required notice of cancellation or nonrenewal of medical-malpracticeinsurance policies from 45 to 90 days.
- HB 2837: to require medicalmalpractice-insurance carriers to file their rules for accepting applicants with the state insurance commissioner.
- HB 3197: to order the reporting of medical-malpractice claims to the state insurance commissioner.
- HB 1926: to place a limit on the number of expert witnesses and prohibit costly depositions of expert witnesses.



- HB 1927: to call for mediation or arbitration of malpractice claims and a 90-day advance notice of intent to file a malpractice lawsuit.
- HB 1928: to help hospitals avoid paying a large part of an injured patient's non-economic damages when the hospitals bear only a small percentage of fault for the patient's injuries.
- HB 2839: to set up a task force on medical-malpractice disputeresolution alternatives
- HB 3200: to limit the time period for filing suit for an injury or death that was allegedly the result of malpractice
- HB 3201: to call on plaintiffs in cases ruled by the court to be "frivolous" to pay court costs, including expertwitness fees

As you can see, in writing these bills we made sure that all sides of the issue were represented because we need to find a solution that works, and yet, Senate Republicans did not bring them to the floor.

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Health Care Coverage for Workers

The vast majority of large corporations in Washington state are responsible at providing health insurance to their employees. But there are some large employers in the state of Washington, as well as across the nation, that don't provide adequate health insurance to their workers.

This year I introduced House Bill 2785, in response to the 650,000 Wash-

ington state residents who are uninsured, many of whom work for large corporations and are sometimes enrolled in Basic Health because their employers do not give them healthcare benefits.

My bill would have required that these big companies step up to the plate and either pick up some of the tab for the Basic Health program, or provide their employees with health benefits

Currently, Washington state taxpayers – that's you – are often picking up the tab. Doesn't it make more sense to

have these large corporations chip in?

My bill didn't get far, but I will bring it back again next session. I'm determined to make sure everyone in our state has access to health care.



Addressing Problem Gambling

Pathological gambling is a progressive disease that devastates not only the gamblers, but also their families and friends. In 1980, the American Psychiatric Association recognized pathological gambling as a chronic illness that can be diagnosed and treated. But in our state the treatment is not covered by health insurance, nor are there publicly or privately funded treatment centers.

Gambling revenues in Washington grew to more than \$1.4 billion in 2003,

but problem gambling has also increased, adding about \$78 million a year to the state's social costs.

This session, as a means to gather sufficient funds to treat problem gamblers, I introduced a bill that would have applied a 5 percent fee on gambling licensee's net revenue for the first year and 1 percent thereafter.

My bill passed the House but met opposition in the Senate. I will continue to push this issue next year. Pathological gambling is a serious concern and it's only getting worse: a 1999 study by the Lottery Commission found that 13 percent of Washington's population falls into the category of problem gamblers.



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